

CASE NO

REQUEST FOR VARIANCE TO THE CITY OF LONGVIEW SUBDIVISION ORDINANCE

Applicant							
rippiicuiti	(Name)	(Address, City and Zip)					
(Phone)			(E-Mail Address)				
Property Owne	er/Developer						
(Name))	(Address, City and Zip)			(Phone)	
compliance	with the followingSubsection		he City of			a variance Ordinance	
Describe vari	ance request:						
Why should t	the variance be appro	ved? What is the ha	ardship?:				
The descript	ion of the property	involved in this Ap	peal is as fo	llows:			
Description o	of Property:						
		(Legal Description and I	Description of locar	tion)			
Zoning Distri	ict	Propo	sed Use				
(Appellantøs Signatu	ure)	(P	hone)			(Date)	